

August 20, 1999

The Honorable John Dingell U.S. House of Representatives Washington, D.C. 20515

Dear Congressman Dingell:

The National Association of Children's Hospitals (N.A.C.H.), which represents more than 100 children's hospitals across the country, supports your legislation — "Bipartisan Consensus Managed Care Improvement Act of 1999" (H.R. 2723) — and its provisions that recognize children have different health and developmental needs than adults and often require age-appropriate pediatric expertise to understand, diagnose and treat their health problems correctly.

N.A.C.H. Strongly Supports the Child-Specific Provisions in Your Legislation

N.A.C.H. strongly supports many of the provisions introduced by you, Congressman Norwood and 64 other cosponsors.

For children, we would highlight and applaud those provisions in your legislation with respect to:

- access to pediatric specialists;
- access to a pediatrician as a primary care provider;
- the definition of "clinical peer" to include a pediatric specialist where appropriate; and
- the recognition of the need for pediatric-specific utilization review criteria where available and appropriate.

The legislation appropriately recognizes that, as the President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry wrote, "[c]hildren have health and developmental needs that are markedly different from adults and require age-appropriate care. Developmental changes, dependency on others, and different patterns of illness, disability and injury require that attention be paid to the unique needs of children in the health system."

The American public strongly support such child-focused provisions. In a February 1999 survey conducted by a team of bipartisan pollsters (Lake Sosin Snell Perry and Associates and The Tarrance Group), 86 percent of adults expressed support for the provision in your legislation that would "ensure children access to pediatric specialists, like pediatric heart specialists and surgeons, and to hospitals that specialize in treating children."

As adults, both individually and collectively as a society, we have a responsibility to pay special attention to the health, safety and development of our nation's children. The public clearly agrees. As the bipartisan team of pollsters note, "...proposals leading with pediatric care have consistently tested the strongly – almost as valence terms."

Children Do Not Command Marketplace Attention

Managed care offers great promise, both to improve access to appropriate health care and to achieve sustainable health care spending. The fulfillment of this promise will depend in part on reaching agreement on minimum standards for how health plans should meet consumers' needs. This promise is especially important for children, who can benefit so much from managed care's focus on primary and preventive care, but who also require assurance of access to pediatric specialty care services for their unique health care needs. If health problems for children are identified and corrected early in an appropriate manner, they are more likely to grow up as healthier and more productive adults.

However, given that children account for such a small part of total health care spending in the economy – less than 15 percent of personal health care spending – their needs alone will not command the economic focus of the competitive marketplace. "Children's health is the poor stepchild in the HMO business," says David Lansky, president of the nonprofit Foundation for Accountability (FACCT), in a Smart Money article. "Kids are ignored for simple economic reasons."

For this important reason, we appreciate your recognition of some of the special health care needs of children.

N.A.C.H. Support for Other Provisions in Your Legislation

We also support other important provisions in your legislation that are important to all Americans, including children. Among them are:

- the "prudent layperson" standard for emergency care;
- the continuity of care provisions for those with chronic or disabling conditions;
- effective appeals and grievance procedures;
- prompt payment of claims;
- · coverage for individuals participating in approved clinical trials; and,
- the prohibition of "gag" rules.

N.A.C.H. has attached for your consideration more thorough comments regarding the "Bipartisan Consensus Managed Care Improvement Act of 1999."

If you have any questions or need additional information, contact me at 703-684-1355.

Thank you for your time and attention to this important matter.

Sincerely,

Bruce Lesley

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Director, Congressional Relations

Enclosure